

Kentucky Board of Podiatry

P.O. Box 174
Glasgow, KY 42142-0174
1-270-834-8932

License Application Renewal

Licenses to practice podiatry in the Commonwealth of Kentucky expire June 30 and must be renewed by July 1 of each year. Renewal requires payment of fees and certification of compliance with twenty (20) hours of continuing medical education. This shall include at least fifteen (15) Category A CMEs and up to five (5) Category B CMEs. You must notify the board of any address changes during the year.

PLEASE PRINT OR TYPE Applying for: ___ Active license ___ Inactive license (no fee or CME required)

Business
Name: _____
Business
Address: _____
City, State
Zip+4 _____

Your
Name: _____
Home
Address: _____
City, State
Zip+4 _____

Business Phone: (____) _____

Home Phone: (____) _____

Fax number: (____) _____

Email: _____

Your License #: _____

Social Security #: _____

DEA #: _____

UPIN #: _____

List states and active license numbers held in other states: _____

List any sanctions, restrictions, suspensions or revocations against your licenses not previously reported.

Have you defaulted on a student loan through KHEAA or the state of Kentucky? ___Yes ___No

RETURN THE FOLLOWING TO THE ABOVE ADDRESS:

1. Completed application form.
2. Original or copy of the certificate of attendance for CME courses.
 - a: If you attended the KPMA scientific seminar you only need to send the certificate
 - b: If you preapproved a seminar prior to attending, send the certificate and board approval letter.
 - c: If you did not preapprove a course, send the certificate and a list of the course titles with hours.
3. If applying for an active license, attach a personal check, certified check or money order in U.S. Funds for \$150.00 made payable to KENTUCKY STATE TREASURER and mail all to the above address.

Your signature: _____ Date: _____